

DECLARATION AND POWER OF ATTORNEY FOR NATIONAL STAGE OF PCT PATENT APPLICATION

As a below-named inventor, I hereby declare that:

Tomas ZORI GARCIA

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **OIL SPILL COLLECTION DEVICE** the specification of which was filed as PCT International Application number PCT/ES 2004/000005 filed on January 9, 2004.

I hereby state that I believe the named inventor or inventors in this Declaration to be the original and first inventor or inventors of the subject matter which is claimed and for which a patent is sought.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365 (b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior foreign application(s):

Priority claimed:

<u>P200300087</u> (Number)	<u>SPAIN</u> (Country)	<u>JANUARY 15, 2003</u> (Date filed)	<u>X</u> Yes	<u> </u> No
<u>P200303077</u> (Number)	<u>SPAIN</u> (Country)	<u>DECEMBER 30, 2003</u> (Date filed)	<u>X</u> Yes	<u> </u> No

As a named inventor, I hereby appoint the following attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with

the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statement

may jeopardize the validity of the application or any patent issued thereon.

Signature:	Date:	Residence and Full Postal Address: Salvia 36 (Urbanizacion la Moraleja) E-28109 Alcobendas Spain
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